	Polk
FOR INSTRUCTIONS, SEE BACK OF FORM	FORM
DISCLOSURE SUMMARY PAGE	DR-2 DISCLOSURE
COMMITTEE NAME (Must be same as on Statement of Organization)	(Rev. 05/2002) REPORT
77111:110 84 14 541001 12414	For Office Use Only
IMPORTANT: Indicate type of committee you are reporting for:	Comm. # // Ole 7- A
(1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party (4) County/Local Candidate (5) County PAC (6) Ballot Issue/Franchise Committee (7) County/City Central Committee (8) Support State of Candidates	Audited Computer
CANDIDATE COMMITTEES ONLY:	<u>C.3.</u>
Candidate Name  John F. Ambroson  Political Party  DECLOSION  DECL	SOARD
Office Sought School Board Melaber  District (if Senale or House) 7	2003
Cimthea a ambroson 223 1974	2/31/02
SIGNATURE OF TREASURER (or person filing this report)  TELEPHONE	DATÉ SIGNED
Routine Penalties Due For Late Filed Reports Range from S	\$20 to \$800
SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:	
. / / 47	
I AM FILING A REPORT FOR AN/A (1) ELECTION	
(report date) Indicate	one [_]
CHECK IF AMENDMENT TO REPORT DATED Local C	Committees, enter Date of Election
	9/10/02
	& Local Committees, enter County in Election is held.
STATEMENT OF CASH ON HAND	
CASH ON HAND at the beginning of the reporting period. (This is the total of all monies held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period, or must be zero if this is first report filed.)	s <u>118.81</u>
ADD TOTAL MONEY TAKEN IN THIS PERIOD	719.00
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)	219.00
Schedule F: Loans Received total (Attach Schedule F)	• • • • • • • • • • • • • • • • • • • •
Schedule H: Total Sales of Campaign Property (Attach Schedule H)	
(Schedule H applies to Candidates' Committees Only)	
SUB-TOTAL	337-81
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	9781
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)	1 1- 01
Schedule F: Loan Repayments total (Attach Schedule F)	240.00
CASH ON HAND at the end of this reporting period (if final report, balance must	A —
be zero) (Attach DR-3)	
**UNPAID BILLS (From Schedule D - Attach Schedule D)	
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	<b>.</b>
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	
CANDIDATE COMMITTEES ONLY:	
CONSULTANT BREAKDOWN (Schedule G Attached?)	YES NO
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)	

CONTRIBUTIONS - MONEY TAKEN IN	
(including candidate's personal funds)	

<b>A</b> (Rev. 06/97)	MONETARY RECEIPTS
CHE AME	CK THIS BOX IF
	s.2

COMMITTEE NAME (Must be same as on Statement of Organization)							
Λ .		<i>_</i> , ,	Broid				
Ambroson	17	7 CN 001	12000				

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	V IF FOR FUND- RAISER INCOME
	ID#	Suku Radia West Des Moiner DA so Jim Apperspach 1590 NW - 101st St.		\$ 100.	
_	ID#	Jim Apperspach 1590 NW = 1015 St. 50325		119.	
	ID#				
	ID#				
-	ID#		i i		
	ID#	-			
	ID# CK#				
	L		SUB-TOTAL		

TOTAL (if last page of this schedule)

s 229°

Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the symmittee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by arriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no amilial relationship, enter "not applicable" in the relationship column.

Page of (for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

## **EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES			
	CK THIS BOX IF			

		same as on Statement of Organization)		
Hmbi	oson for.	School Board		
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
18/02	ID# CK#	West DesMoines Scho WDM. IA	els Foundation	s 97.81
	ID#		Bungina jo Close	<del>                                     </del>
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
-	ID#	•		
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
			SUB-TOTAL	\$
			TOTAL (If last page of this schedule)	\$ 97.81

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, pollting, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 56.6(3)(i).)

Page \_\_\_\_\_ of \_\_\_\_

1 1	NAME(MUSI DU SAME AS ON STATEMENT OF Organi PVO SON Far School Bo	zation) K-d				(Rev. 08/96)	LOANS RECEIVED & REPAID
NOTE: This schedule reports money loaned to the committee which is deposited in the committee account.  TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ 240.00					CHECK T		
PARTI- MON (Ong	HETARY LOANS RECEIVED THIS REPORTING pinal source of loan, such as a bank, must be she lived. Include loans from candidate's personal fu	PERIOD			NETARY LOAN REPAYMENTS MADE <u>THIS</u> Ins forgiven must be reported on Schedule E		
DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, II Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable*)	AMOUNT OF LOAN	DATE PAID (MWDD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, if Applicable)	RELATIONSH TO CANDIDAT (If Applicable	E REPAID
			S	1%1/02	Fred Porr 1735 - NW 1015t Clive IA 50325		240 =
L	TOTAL (PART I)	\$		4 h	TOTAL CASH REPAYMENTS (P)	ART II)	5 240°
				TOTAL O	From Schedule E TOTAL LOANS FORGIN		0
making a con consanguinity packet.) If su	aw requires candidate committees to disclose the intribution to the committee. Relationship must be a (blood relatives) and affinity (relatives by marris arrame of contributor is the same as candidate, it enter "not applicable" in the relationship column	s shown to the third do age). (See Page 2 of out there is no familial	egree of forms		Page_	ot (for Schedul	(e F)